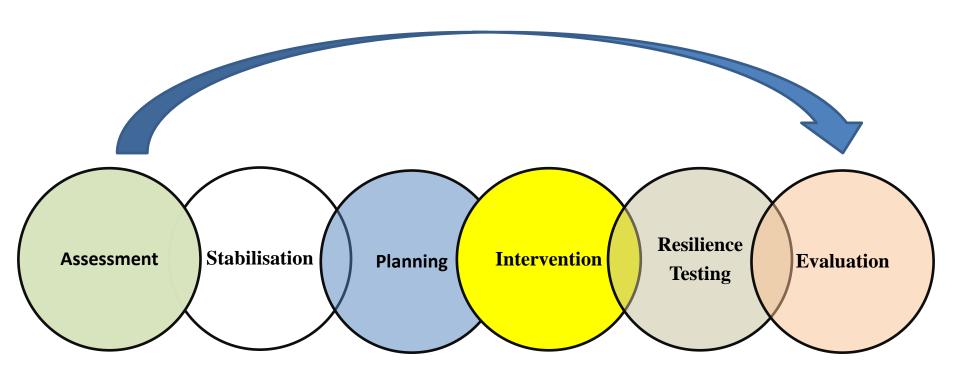


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### The Think CBT ASPIRE Model



The process of therapeutic change can be managed over six key phases. Whilst this Provides a general sequential basis for organising therapy, the process is iterative and responsive to the specific needs of the client.

#### **Assessment**

This involves an assessment of the presenting problem, how the problem negatively influences thoughts, emotions, behaviours and physical sensations, the factors that trigger and maintain the problem, the things that make it better or worse, ideas on what originally caused the problem, any relevant medical or psychological history and a formulation or "blueprint" of how the problem operates. The formulation provides the basis for planning and selecting the right treatment and the identification of **goals** for therapy.

#### **Stabilisation**

This involves identifying and teaching general CBT techniques for re-establishing sufficient personal stability, confidence and clarity to fully engage in the broader CBT process. This may involve psycho education on the causes of distress, relaxation or mindfulness exercises, some early modelling or miniexperiments to provide an initial breakthrough. Care is taken to avoid strengthening unhelpful safety / avoidance behaviours. feedback from this phase is incorporated into the formulation of the problem and the identification of SMART goals.

### **Planning**

This involves identifying, selecting and sequencing the right cognitive and behavioural treatment techniques to tackle the different aspects of the problem as identified in the formulation. The different options are jointly reviewed by the therapist and the client and a treatment plan is collaboratively agreed. This includes The CBT interventions to be used in sessions, between session assignments and the overall timescales for therapy.

#### **Interventions**

This is the main treatment phase of the CBT process. Most approaches involve a combination of cognitive (thinking) and behavioural (doing)change methods. Typical interventions include verbal, written, emaginal, problem solving, role play, acting-out experiments, and gradual exposure exercises. A large part of this phase of the process is dedicated to applying what is learnt in the session, to the clients real life situations. The techniques used are always safe and relevant to the problem.

### **Resilience Testing**

The purpose of this phase is to check that the client can effectively transfer their learning to their everyday life, maintaining a realistic and resilient perspective when placed in difficult or unexpected situations. A Lapse prevention document is built up using all of the key learning points from the CBT process and this provides a contingency plan to prepare for any future negative or unexpected problems.

### **Evaluation**

The purpose of this phase is to undertake a final end of process evaluation, providing valuable feedback for both therapist and client alike. Although the final evaluation is conducted at the end of CBT, regular feedback is used throughout each phase of the CBT process to maintain focus, ensure a good working relationship and improve the relevance and effectiveness of the approaches used. The final evaluation usually involves some written feedback to maintain objectivity.